TY NAME: BASF Co	orp.					
TY ID (PREMISE NU	JMBER):	02-47-04-0195				
TY ADDRESS: 120	Pine Stre	et, Elyria, OH 44035				
e or most recent modification date: 07/27/01			Includes Permit Numbers	Includes Permit Numbers – P0111903, P0116505, P0117027		
ERLY Reporting Period			SEMIANNUAL Reporting Period (please indicate "N/A" below in the From and To if this report does include semiannual deviation reporting)			
07/01/2015		To: 09/30/2015	From: NA		To: NA	
ages in <u>report,</u> includ	ding this o	ne: 16 pages				
list any supporting attachments						
ng deadline: 10/31/1	12015					

NOTE: The deviation reporting period shall be stated in the following format: Axx/xx/xx through zz/zz/zz@ where xx/xx/xx and zz/zz/zz are the beginning and end dates for the deviation reporting period respectively.

SIGNATURE FOR STATEMENT

This statement shall be signed by the responsible official as defined in OAC rule 3745-77-01(GG). Making of any false material statement, representation or certification constitutes

a violation of ORC 3704.05(H), and subjects the responsible party signing this statement to civil and/or criminal penalties as provided in ORC 3704.06(C) and ORC 3704.

CERTIFICATION

Based on information and belief formed after reasonable inquiry, I hereby affirm, as stated in OAC rule 3745-77-03(D), that the statements and information as transmitted in this

Title V report are true, accurate and complete to the best of my knowledge.

Authorized Signature:	Date
Name (Please Print)	Title

Ohio Environmental Protection Agency Section I- Page 1 Deviation Reporting

ACILITY NAME: BASF	Corp.		
ACILITY ID (PREMISE	NUMBER): 02-47-04-0195		
ACILITY ADDRESS: 12	20 Pine Street, Elyria, OH 44035		
ssuance or most recent i	modification date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting F report does include semian	Period (please indicate "N/A" below in the "From" and "To" fields if thi Inual deviation reporting)
rom: 07/01/2015	To: 09/30/2015	From: NA	To: NA
eporting deadline: 10/3	1/2015		

Ohio Environmental Protection Agency
Deviation Reporting

FACILITY NAME

FACILITY ID (PREMISE NUMBER)

FACILITY ADDRESS

Issuance or most recent modification date

QUARTERLY Reporting Period

SEMIANNUAL Reporting Period (please indicate AN/A@ below in the AFr this report does include semiannual deviation reporting)

From:

SECTION I -

From:

Reporting deadline

704.05(H), PART I General Terms and Conditions (Permit Requirement Reporting) (Table1)

To:

Mark the following box with an >X= if no General Terms and Conditions deviations occurred

THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART I OF THE TITLE V PERMIT. DURING THE REPORTING PERIOD.

Add rows as necessary to the following table for reported deviations (one for each General Term as applicable; see detailed instructions for more information) (Table2)

•			·			· · · · · · · · · · · · · · · · · · ·		
PERMIT RM scription	Reporting Requirement (choose one)		ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO	PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTION PREVENTATIVE MEASURE	
Quarterly Semi- Annual		1 1		DEVIATION DURATION		DESCRIPTION AND MAGNITUDE OF THE DEVIATION		
				DATE / TIME START	DATE / TIME END			
I								

TITLEVDEVIATIONREPORT_2NDQRT2013.DOC 11/2005

To:

Ohio Environmental Protection Agency Deviation Reporting

FACILITY NAME			
FACILITY ID (PREMISE NUME	BER)		
FACILITY ADDRESS			
Issuance or most recent modifi	cation date		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period (please in this report does include semiannual deviation)	
From:	То:	From:	То:
Reporting deadline			

		ACTUAL METHOD USED TO DETERMINE COMPLIANCE (choose one)			DEVIATION INFORMATIO	PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTION PREVENTATIVE MEASUR	
·	Quarterly Semi- Annual		rterly Semi-			DESCRIPTION AND MAGNITUDE OF THE DEVIATION		
				DATE / TIME START	DATE / TIME END			

Ohio Environmental Protection Agency Section II- Page 1 Deviation Reporting

FACILITY NAME: BASF Corp.					
FACILITY ID (PREMISE NUMBER): 0	:-47-04-0195				
FACILITY ADDRESS: 120 Pine Stree					
Issuance or most recent modification of					
QUARTERLY Reporting Period		SEMIANNUAL Report this report does includ			n the Fron
From: 07/01/2015	To: 09/30/2015	From: NA	From: NA To: NA		
Reporting deadline: 10/31/2015					
From: 07/01/2015	To: 09/30/2015	this report does includ		tion repo	orting)

<u>Section II - Part II Facility-wide Permit Requirement Reporting</u> Insignificant Emissions Unit Negative Declarations (Table1)

List each insignificant emissions unit where no deviations of any PTI terms or applicable requirements for the listed emissions unit occurred, or add rows as necessary to the deviation reporting table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

VERE NO DEVIATIONS OF ANY PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II., LE V PERMIT:

ray Dryers, L	Littleford mixer
---------------	------------------

HC-11 Tanks

Nitric Acid Dilution

ZR Sinter Furnace

Ammonia Stripper

Horne Tableting Machines

Kewanee Boiler, rated at 8.6 MMBTU/hr

Kewanee Boiler, rated at 8.6 MMBTU/hr

Ohio Environmental Protection Agency Section II- Page 2 Deviation Reporting

Deviation reporting			
FACILITY NAME: BASF Cor	p.		
FACILITY ID (PREMISE NUM	MBER): 02-47-04-0195		
FACILITY ADDRESS: 120 P	Pine Street, Elyria, OH 44035		
Issuance or most recent mod	lification date: 07/27/01		
QUARTERLY Reporting Period			Period (please indicate "N/A" below in the Fron emiannual deviation reporting)
From: 07/01/2015	01/2015 To: 09/30/2015 From: NA		To: NA
Reporting deadline: 10/31/20)15		·
		·	

VERE NO DEVIATIONS OF ANY PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II. I

Kewanee Boiler, rated at 8.6 MMBTU/hr
Kewanee Boiler, rated at 8.6 MMBTU/hr Kewanee Boiler, rated at 8.6 MMBTU/hr
Building 27 Spin Flash Dryer

Ohio Environmental Protection Agency Section II- Page 3 Deviation Reporting

FACILITY NAME: BASE Corp.			
FACILITY ID (PREMISE NUME	BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	e Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Perio	QUARTERLY Reporting Period		Period (please indicate "N/A" below in the Fron
From: 07/01/2015	To: 09/30/2015	15 From: NA To: NA	
Reporting deadline: 10/31/201	5		

Facility-wide Permit Requirements Terms and Conditions (Permit Requirement Reporting) - Negative Declarations (mark with an >X= if applicable) (Table 2)

THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART II OF THE TITLE V PERMIT DURING THE REPORTING PERIOD SPECIFIED IN THIS REPORT

<u>Section II - Part II Facility-wide and/or IEU permit requirement (Permit Requirement Reporting) - Deviation Reporting</u> (Table 3) Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information)

r IEU T iption		Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	TO INFORMATION CAUSE FOR THE DEVIATION		CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALFUN WRIT REPOF DATE		
is for	Quarterly	Semi- Annual		DURATION MAGNITUDE OF THE		DESCRIPTION AND MAGNITUDE OF THE			? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the space below)	(If no reports state ANO R in the spac
				DATE / TIME START	DATE / TIME END	DEVIATION			the next column)		

Ohio Environmental Protection Agency Section II- Page 4 Deviation Reporting

Boviation reporting			
FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMB	ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	e Street, Elyria, OH 44035		
Issuance or most recent modific	cation date: 07/27/01		
QUARTERLY Reporting Period	UARTERLY Reporting Period		Period (please indicate "N/A" below in the Fror miannual deviation reporting)
From: 07/01/2015 To: 09/30/2015		From: NA	To: NA
Reporting deadline: 10/31/2015	5		·

r IEU T iption	Reporting Requirement (choose one) Or both ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALFUN WRIT REPOF DATE	
s for	Quarterly	Semi- Annual		DURATION MAGNITU	DESCRIPTION AND MAGNITUDE OF THE			MALFUNCTION ? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If no reports state ANO R in the spac	
				DATE / TIME START	DATE / TIME END	DEVIATION			the next column)		

Ohio Environmental Protection Agency Section III- Page 1 Deviation Reporting

FACILITY NAME: BASF Cor	rp.		
FACILITY ID (PREMISE NUM	MBER): 02-47-04-0195		
FACILITY ADDRESS: 120 F	Pine Street, Elyria, OH 44035		
Issuance or most recent mod	dification date: 07/27/01		
QUARTERLY Reporting Per	iod		g Period (please indicate "N/A" below in the From semiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			·

Ohio Environmental Protection Agency Section III- Page 1

Deviation Reporting

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER)): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine St	reet, Elyria, OH 44035		
Issuance or most recent modification	on date: 07/27/01		
QUARTERLY Reporting Period			Period (please indicate "N/A" below in the From semiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			

Section III - Part III Emissions Unit Terms and Conditions (Permit Requirement Reporting) - Negative Declarations (Table 1)

List each emissions unit where no deviations of any terms for the listed emissions unit occurred, or add rows as necessary to the second table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

VERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART III OF THE TITLE V PERMIT FOR THE FOLLOWING LISTED EMISSIONS UNITS:

-		
Emissions Unit ID	Please place an >X= below if there were no Quarterly Deviations - If an >X= is not indicated, the deviation(s) must be identified in Table2 below	If applicable, please place an >X= below if there no Semiannual Deviations - If an >X= is not inditine the deviation(s) must be identified in Table2 b
	X	X
	X	Χ
	X	Х
		Х
		X
	X	Х

Ohio Environmental Protection Agency Section III- Page 2 Deviation Reporting

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE N	NUMBER): 02-47-04-0195		
FACILITY ADDRESS: 120	0 Pine Street, Elyria, OH 44035		
Issuance or most recent m	nodification date: 07/27/01		
QUARTERLY Reporting P	'eriod		ing Period (please indicate "N/A" below in the semiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31	/15		
	X		X
			X
	X		X
	X		X
	X		X
	X		X
	X		X
	X		X
	X		X
	X		Х

Ohio Environmental Protection Agency Section III- Page 3 Deviation Reporting

FACILITY NAME: BASE Co	orp.			
FACILITY ID (PREMISE NU	JMBER): 02-47-04-0195			
FACILITY ADDRESS: 120	Pine Street, Elyria, OH 44035			
Issuance or most recent mo	odification date: 07/27/01			
QUARTERLY Reporting Pe	eriod	SEMIANNUAL Rep		ise indicate "N/A" below in the From eviation reporting)
From: 07/01/15	To: 09/30/15	From: NA		To: NA
Reporting deadline: 10/31/1	15			
	X		X	
	X		X	
	X		Х	
	X		X	
	X		X	
	Х		X	
	Х		X	
			X	

Ohio Environmental Protection Agency Section III- Page 4 Deviation Reporting

FACILITY NAME: BASF Co	rp.		
FACILITY ID (PREMISE NU	MBER): 02-47-04-0195		
FACILITY ADDRESS: 120 F	Pine Street, Elyria, OH 44035		
Issuance or most recent mod	dification date: 07/27/01		
QUARTERLY Reporting Per	riod		Period (please indicate "N/A" below in the From miannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/1	5		
	X	X	
	×	×	
	X	X	
	X	X	
	X	X	
	X	X	
		X	
		X	
	X	X	
	l l	ı	

Ohio Environmental Protection Agency Section III- Page 5 Deviation Reporting

FACILITY NAME: BASF Co	rp.		
FACILITY ID (PREMISE NU	MBER): 02-47-04-0195		
FACILITY ADDRESS: 120	Pine Street, Elyria, OH 44035		
Issuance or most recent mod	dification date: 07/27/01		
QUARTERLY Reporting Pe	riod	SEMIANNUAL Reporting Pethis report does include sem	eriod (please indicate "N/A" below in the From iannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/1	5		
	X	X	

Ohio Environmental Protection Agency Section III- Page 6

Deviation Reporting

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBE	ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modifica	ation date: 07/27/01		
QUARTERLY Reporting Period			Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			

<u>Section III - Part III Emissions Unit Terms and Conditions (Permit Requirement Reporting) - Deviation Reporting</u> (Table2)

Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information) - Please group deviations for each emissions unit that has deviations of multiple terms.

	/	<u>, </u>											
on	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE			DEVIATION INFORMATION		CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	M)	
		Quarterly	Semi- Annual	2, ,,,,,,,,,	DEVIATION DESCRIPTION AND MAGNITUDE OF THE DEVIATION						MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	(1
					DATE/TIME START	DATE/TIME END	THE DEVIATION			the next column)	space below)	R. the	
٠ ٦	B.II.1-The pressure drop across the third stage of the scrubber shall be continuously maintained between 3 and 6" WC at all times while the emissions unit is in operation.	х		Pressure drop readings across the third stage of the Trimer scrubber	8/28/15 0900	8/31/15 0100	ΔP less than 3"WC across third stage	Scrubber water flow rate/inlet exhaust flow issues	Lines flushed, calciner taken offline	No	No		

Ohio Environmental Protection Agency Section III- Page 7 Deviation Reporting

FACILITY NAME: BASF Co	rp.		
FACILITY ID (PREMISE NUI	MBER): 02-47-04-0195		
FACILITY ADDRESS: 120 F	Pine Street, Elyria, OH 44035		
Issuance or most recent mod	dification date: 07/27/01		
QUARTERLY Reporting Per	riod		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15	 5		·

n	TITLE V PERMIT TERM NO & Description	Report Require (choose or be	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE			DEVIATION INFORMATION		CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS⊕ in the	(4
					DATE/TIME START	DATE/TIME END	THE DEVIATION			the next column)	space below)	RI the
	B.II.1-The pressure drop across the third stage of the scrubber shall be continuously maintained between 3 and 6" WC at all times while the emissions unit is in operation.	X		Pressure drop readings across the third stage of the Trimer scrubber	8/28/15 0900	8/31/15 0100	ΔP less than 3"WC across third stage	Scrubber water flow rate/inlet exhaust flow issues	Lines flushed , calciner taken off line	No	No	

Ohio Environmental Protection Agency Section III- Page 8 Deviation Reporting

FACILITY NAME: BASF Cor).		
FACILITY ID (PREMISE NUM	IBER): 02-47-04-0195		
FACILITY ADDRESS: 120 P	ne Street, Elyria, OH 44035		
Issuance or most recent mod	fication date: 07/27/01		
QUARTERLY Reporting Peri	od		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			

on	TITLE V PERMIT TERM NO & Description	Repo Require (choose or b	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	(1
					DATE/TIME START	DATE/TIME END	THE DEVIATION			the next column)	space below)	Ri the
1)	B.II.1-The pressure drop across the third stage of the scrubber shall be continuously maintained between 3 and 6"WC at all times while the emissions unit is in operation.	x		Pressure drop readings across the third stage of the Trimer scrubber	8/3/15 1600	8/4/15 0300	ΔP less than 3"WC across third stage	Scrubber water flow rate/inlet exhaust flow issues	Lines flushed	No	No	

Ohio Environmental Protection Agency Section III- Page 9 Deviation Reporting

FACILITY NAME: BASF Corp	ρ.		
FACILITY ID (PREMISE NUM	//BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pi	ine Street, Elyria, OH 44035		
Issuance or most recent modif	fication date: 07/27/01		
QUARTERLY Reporting Period	od		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			•

n	TITLE V PERMIT TERM NO & Description	Repo Require (choose or b	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATI INFORMA		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS⊕ in the	G
					DATE/TIME START	DATE/TIME END	THE DEVIATION			the next column)	space below)	RI the
)	B.II.1-The pressure drop across the third stage of the scrubber shall be continuously maintained between 3 and 6"WC at all times while the emissions unit is in operation.	X		Pressure drop readings across the third stage of the Trimer scrubber	8/5/15 0200	8/5/15 1800	ΔP less than 3"WC across third stage	Scrubber water flow rate/inlet exhaust flow issues	Lines flushed	No	No	

Ohio Environmental Protection Agency Section III- Page 10 Deviation Reporting

FACILITY NAME: BASF Corp	ρ.		
FACILITY ID (PREMISE NUM	//BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pi	ine Street, Elyria, OH 44035		
Issuance or most recent modif	fication date: 07/27/01		
QUARTERLY Reporting Period	od		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			•

n	TITLE V PERMIT TERM NO & Description	Repo Require (choose or b	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	G
					DATE/TIME START	DATE/TIME END	THE DEVIATION			the next column)	space below)	RI the
)	B.II.1-The pressure drop across the third stage of the scrubber shall be continuously maintained between 3 and 6"WC at all times while the emissions unit is in operation.	X		Pressure drop readings across the third stage of the Trimer scrubber	8/8/15 1700	8/9/15 0900	ΔP less than 3"WC across third stage	Scrubber water flow rate/inlet exhaust flow issues	Lines flushed	No	No	

Ohio Environmental Protection Agency Section III- Page 11 Deviation Reporting

FACILITY NAME: BASF Corp	ρ.		
FACILITY ID (PREMISE NUM	//BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pi	ine Street, Elyria, OH 44035		
Issuance or most recent modif	fication date: 07/27/01		
QUARTERLY Reporting Period	od		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			•

n	TITLE V PERMIT TERM NO & Description	Repo Require (choose or b	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATI INFORMA		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	G
					DATE/TIME START	DATE/TIME END	THE DEVIATION			the next column)	space below)	RI the
)	B.II.1-The pressure drop across the third stage of the scrubber shall be continuously maintained between 3 and 6"WC at all times while the emissions unit is in operation.	X		Pressure drop readings across the third stage of the Trimer scrubber	8/10/15 0000	8/10/15 1500	ΔP less than 3"WC across third stage	Scrubber water flow rate/inlet exhaust flow issues	Lines flushed	No	No	

Ohio Environmental Protection Agency Section III- Page 12 Deviation Reporting

FACILITY NAME: BASF Corp	ρ.		
FACILITY ID (PREMISE NUM	//BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pi	ine Street, Elyria, OH 44035		
Issuance or most recent modif	fication date: 07/27/01		
QUARTERLY Reporting Period	od		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			•

on	TITLE V PERMIT TERM NO & Description	Repo Require (choose or b	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATI INFORMA		PROBABLE CAUSE FOR THE DEVIATION	CAUSE FOR ACTIONS / THE PREVENTATIVE	DEVIATION VE ATTRIBUTABLE REF TO A DA	MALFUNCTION VERBAL REPORT(S) DATE(S)	M)
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	(
					DATE/TIME START	DATE/TIME END	INE DEVIATION			the next column)	space below)	the
)	B.II.1-The pressure drop across the third stage of the scrubber shall be continuously maintained between 3 and 6"WC at all times while the emissions unit is in operation	х		Pressure drop readings across the third stage of the Trimer scrubber	8/19/15 0200	8/25/15 0500	ΔP less than 3"WC across third stage	Scrubber water flow rate/inlet exhaust flow issues	Lines flushed, calciner taken off line	No	No	

Ohio Environmental Protection Agency Section III- Page 13 Deviation Reporting

FACILITY NAME: BASF Co	rp.		
FACILITY ID (PREMISE NUI	MBER): 02-47-04-0195		
FACILITY ADDRESS: 120 F	Pine Street, Elyria, OH 44035		
Issuance or most recent mod	dification date: 07/27/01		
QUARTERLY Reporting Per	riod		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15	 5		·

on	TITLE V PERMIT TERM NO & Description	Repo Require (choose or b	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATI INFORMA		PROBABLE CAUSE FOR THE DEVIATION	CAUSE FOR ACTIONS / THE PREVENTATIVE		AUSE FOR ACTIONS / DEVIATION THE PREVENTATIVE ATTRIBUTABLE		MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION		(\)Ye	MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	(i		
					DATE/TIME START	DATE/TIME END				the next column)	space below)	the		
1)	B.II.1-The pressure drop across the third stage of the scrubber shall be continuously maintained between 3 and 6"WC at all times while the emissions	х		Pressure drop readings across the third stage of the Trimer scrubber	8/26/15 0900	8/28/15 0000	ΔP less than 3"WC across third stage	Scrubber water flow rate/inlet exhaust flow issues	Lines flushed, calciner taken off line	No	No			

Ohio Environmental Protection Agency Section III- Page 14 Deviation Reporting

FACILITY NAME: BASF Corp	ı		
FACILITY ID (PREMISE NUM	BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modif	ication date: 07/27/01		
QUARTERLY Reporting Perio	od		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			

on .	TITLE V PERMIT TERM NO & Description	Repo Require (choose or b	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F
		Quarterly	Semi- Annual	COM EMNOL		ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION	DEVIATION		MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	9
					DATE/TIME START	DATE/TIME END				the next column)	space below)	the
1)	B.II.1-The pressure drop across the third stage of the scrubber shall be continuously maintained between 3 and 6"WC at all times while the emissions unit is in operation.	X		Pressure drop readings across the third stage of the Trimer scrubber	9/17/15 1800	9/20/15 2000	ΔP less than 3"WC across third stage	Scrubber water flow rate/inlet exhaust flow issues	Lines flushed, calciner taken off line	No	No	
	C.I.d.3.b —A pressure drop range of 1-5 inches of water across the second stage of the TriMer caustic scrubber	Х		Shift pressure readings	9/24/15 2100	9/25/15 2100	Pressure reading below 1"	Scrubber water flow rate/inlet exhaust flow issues	Lines flushed	No	No	

Ohio Environmental Protection Agency Section III- Page 15 Deviation Reporting

FACILITY NAME: BASF Corp	ı		
FACILITY ID (PREMISE NUM	BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modif	ication date: 07/27/01		
QUARTERLY Reporting Perio	od		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			

) pn	TITLE V PERMIT TERM NO & Description	Repo Require (choose or b	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATI INFORMA		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	(4
					DATE/TIME START	DATE/TIME END	3200111010			the next column)	space below)	RI the
er	B.II.2-The pressure drop across the scrubber shall be maintained at a value of not less than 2 while the emissions unit is in operation	Х		Daily pressure drop readings across the scrubber	8/31/15 0100	08/31/15 0200	ΔP readings below 2 "WC	Low flow	Adjusted	No	No	No
er	B.II.2-The pressure drop across the scrubber shall be maintained at a value of not less than 2 while the emissions unit is in	×		Daily pressure drop readings across the scrubber	9/2/15 0400	9/3/15 0200	ΔP readings below 2 "WC	Low flow	Adjusted	No	No	No

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FACILITY NAME: BASF Corp	ρ.		
FACILITY ID (PREMISE NUM	//BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pi	ine Street, Elyria, OH 44035		
Issuance or most recent modif	fication date: 07/27/01		
QUARTERLY Reporting Period	od		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			•

on	TITLE V PERMIT TERM NO & Description	Repo Require (choose or b	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATI INFORMA		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F
		Quarterly	Semi- Annual		1	ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION	DEVINITION	WE TOOK TO THE TO	MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	(1
					DATE/TIME START	DATE/TIME END				the next column)	space below)	the
)	C (d)3-4.1-Pressure Drops	Х		Continuous Monitoring	7/20/15 1230	7/20/15 1300	ΔP readings above requirements	Clogged filter	Filter cleaned	No	No	No
)	C (d)3-4.1-Pressure Drops	Х		Continuous Monitoring	7/27/15 1230	7/27/15 1330	ΔP readings above requirements	Clogged filter	Filter cleaned	No	No	No
)	C (d)3-4.1-Pressure Drops	Х		Continuous Monitoring	8/9/15 0549	8/9/15 0813	ΔP readings above requirements	Clogged filter	Filter cleaned	No	No	No

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FACILITY NAME: BASE Corp).		
FACILITY ID (PREMISE NUM	BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pi	ne Street, Elyria, OH 44035		
Issuance or most recent modi	fication date: 07/27/01		
QUARTERLY Reporting Period	od		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			

on	TITLE V PERMIT TERM NO & Description	Repo Require (choose or b	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F	
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	6
					DATE/TIME START	DATE/TIME END	THE BEVIATION			the next column)	space below)	RI the
)	B.8.a - Visible emissions from capture systems	Х		Daily visual inspections	7/20/15 1500	04/03/15 1520	Visible emissions	Overfill K- tron	Release vacuumed up	No	No	
)	B.8.a - Visible emissions from capture systems	Х		Daily visual inspections	7/22/15 1350	04/03/15 1410	Visible emissions	Valve not closed	Release vacuumed up valve closed	No	No	
)	B.8.a - Visible emissions from capture systems	Х		Daily visual inspections	7/27/15 0300	7/27/15 0500	Visible emissions	K-tron leaking from duct hood	Release vacuumed up hood fixed	No	No	

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FACILITY NAME: BASF Corp	ı		
FACILITY ID (PREMISE NUM	BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modif	ication date: 07/27/01		
QUARTERLY Reporting Perio	od		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			

					I							-
on	TITLE V PERMIT TERM NO & Description	Repor Require (choose or bo	ement e one)	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATI INFORMA		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F
		Quarterly	Semi- Annual	2,,,,,,,,,		ATION ATION	DESCRIPTION AND MAGNITUDE OF THE DEVIATION		(Yes or No - If ma Yes, continue to REF	(If no reports were made, state ANO REPORTS@ in the	(1	
					DATE/TIME START	DATE/TIME END	THE BEVILLIA			the next column)	space below)	the
:)	B.8.a - Visible emissions from capture systems	Х		Daily visual inspections	7/27/15 0900	7/27/15 1100	Visible emissions	K-tron leaking from duct hood	Release vacuumed up hood fixed	No	No	
:)	B.8.a - Visible emissions from capture systems	Х		Daily visual inspections	7/27/15 0900	7/27/15 1100	Visible emissions	Mixer leaking	Collection valve opened	No	No	
)	B.8.a - Visible emissions from capture systems	Х		Daily visual inspections	8/14/15 0530	8/14/15 0550	Visible emissions	Loose bolt	Release vacuumed up bolt tightened	No	No	

Ohio Environmental Protection Agency Section III- Page 19 Deviation Reporting

FACILITY NAME: BASF Corp	ı		
FACILITY ID (PREMISE NUM	BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modif	ication date: 07/27/01		
QUARTERLY Reporting Perio	od		Period (please indicate "N/A" below in the From emiannual deviation reporting)
From: 07/01/15	To: 09/30/15	From: NA	To: NA
Reporting deadline: 10/31/15			

on	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F
		Quarterly	Semi- Annual	DEVIA		ATION DESCRIPTION AND MAGNITUDE OF THE DEVIATION		221,11,101		MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	, i
					DATE/TIME START	DATE/TIME END	THE BEVIATION			the next column)	space below)	Ri the
	3.d.3.b – Pressure drop across the dust collector shall not be less than 1" of water	×		Daily pressure drop readings	7/27/15 0300	7/27/15 2400	Pressure drop less than 1"	Insufficient air flow to dust collector	Increased airflow	No	No	
	3.d.3.b – Pressure drop across the dust collector shall not be less than 1" of water	X		Daily pressure drop readings	7/30/15 1045	8/10/15 1000	Pressure drop less than 1"	Insufficient air flow to dust collector	Increased airflow	No	No	

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Deviation Reporting

<u></u>							
FACILITY NAME: BASF Corp.							
FACILITY ID (PREMISE NUMBE	.R): 02-47-04-0195						
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035						
Issuance or most recent modifica	ation date: 07/27/01						
QUARTERLY Reporting Period			SEMIANNUAL Reporting Period (please indicate "N/A" below in the From this report does include semiannual deviation reporting)				
From: 07/01/15	To: 09/30/15	From: NA	To: NA				
Reporting deadline: 10/31/15							

n	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MA F	
		Quarterly	Semi- Annual		DEVIATION DURATION		DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the	,
					DATE/TIME START	DATE/TIME END	THE DEVIATION			the next column)	space below)	RI the
	3.d.3.b – Pressure drop across the dust collector shall not be less than 1" of water	×		Daily pressure drop readings	8/13/15 1025	8/16/15 1145	Pressure drop less than 1"	Insufficient air flow to dust collector	Increased airflow	No	No	

See page 3 of the instructions ASECTION III ADDITIONAL DETAILED INSTRUCTIONS FOR COMPLETING A DEVIATION REPORTING TABLE of for guidance on this table.